

**2012**  
**APPLICATION TO OPERATE A PERMANENT**  
**FOOD SERVICE ESTABLISHMENT**  
PERMIT YEAR IS APRIL 1<sup>ST</sup> THROUGH MARCH 31<sup>ST</sup>

New! Now you can apply on-line at <http://www.kingcounty.gov/healthservices/health/ehs/portal.aspx>

FOOD SERVICE NAME AND LOCATION

MAILING ADDRESS

BUSINESS NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

OWNER NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY: \_\_\_\_\_, STATE: \_\_\_\_\_, ZIP: \_\_\_\_\_

CITY: \_\_\_\_\_, ZIP: \_\_\_\_\_

BUSINESS PHONE: ( ) \_\_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_

DAY TIME PHONE: ( ) \_\_\_\_\_ - \_\_\_\_\_

Check all that apply

- ☐ Change of Ownership  
☐ Change of Business Name

- ☐ Change of mailing address

Previous Business Name: \_\_\_\_\_

Does your establishment qualify as a "Chain Food Establishment"? Yes ☐ No ☐

A "Chain Food Establishment" is one of at least 15 establishments with the United States doing business under the same name, collectively having at least \$1 million in gross annual sales and offering substantially the same menu items (80% or more) by number, regardless if under the same ownership or type of ownership. Transfat and Menu Labeling information available at:

[www.kingcounty.gov/health/healthyeating](http://www.kingcounty.gov/health/healthyeating)

**Notice:** By signing this form, you attest to the accuracy of the information and that you will comply with the food code.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

Call this office at (206) 296-2966 if you do not receive a renewal application by February 28<sup>th</sup>. To avoid late fees, renew your permit before it expires.

**PAYMENT INFORMATION**

See back of form for fee schedule and where to submit this application.

Check if applicable:

☐ New operation or ownership, date opened \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Prorated Permit Fee \$ \_\_\_\_\_

☐ Seasonal operation:

Late Fee \$ \_\_\_\_\_

Date of opening \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Field Plan Review Fee \$ \_\_\_\_\_

Date of closing \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Seating capacity (if seating is provided) \_\_\_\_\_

**Total Due** \$ \_\_\_\_\_

☐ Check or Money Order, Payable to: **SKCDPH**

☐ VISA ☐ Master Card ☐ Discover Card Number: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Card Billing Address: \_\_\_\_\_, City: \_\_\_\_\_ ZIP: \_\_\_\_\_ - \_\_\_\_\_

Card Expiration Date: \_\_\_\_ / \_\_\_\_ 3 Digit Code (on back): \_\_\_\_

Required Signature (as on Credit Card): \_\_\_\_\_

**OFFICE USE ONLY**

PR \_\_\_\_\_ FA \_\_\_\_\_ PE \_\_\_\_\_ PLAN REVIEW SR \_\_\_\_\_ VARIANCE SR \_\_\_\_\_

CHECK NUMBER \_\_\_\_\_ DATE FACILITY OPENED \_\_\_\_ / \_\_\_\_ / \_\_\_\_

INSPECTOR NAME (print) \_\_\_\_\_ SIGNATURE \_\_\_\_\_ DATE \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Food Establishment Categories and Permit Fees 2012**  
Effective 1/01/12 - 12/31/12

<b>PERMIT CATEGORY</b>	<b>Classification/Fee Risk 1</b>	<b>Classification/Fee Risk 2</b>	<b>Classification/Fee Risk 3</b>
General Food service- 0-12 seats	6701 - \$350	6702 - \$583	6703 - \$808
General Food Service- 13-50 seats	6711 - \$354	6712 - \$591	6713 - \$852
General Food Service- 51-150 seats	6721 - \$362	6722 - \$621	6723 - \$911
General Food Service- 151-250 seats	6731 - \$376	6732 - \$635	6733 - \$965
General Food Service- over 250 seats	6741 - \$390	6742 - \$639	6743 - \$1,009
Limited Food service- no permanent plumbing	6757 - \$350	NA	NA
Bakery- no seating	6751 - \$350	6752 - \$583	6753 - \$808
Bed and Breakfast	6761 - \$350	NA	NA
Grocery Store- no seating	6765 - \$350	6766 - \$583	NA
Caterer	6771 - \$350	6772 - \$583	6773 - \$808
Meat/Fish Market	NA	NA	6777 - \$657
Vending Machine	6775 - \$350	NA	NA
Mobile Food Unit	6781 - \$350	6782 - \$583	6783 - \$808
Mobile Food Unit Commissary	6784 - \$151	6785 - \$241	6785 - \$241
Nonprofit Institution - unlimited seating, 501 (C)(3) status, Washington State Commission for the blind status, or municipal jail.	6735 - \$350	6736 - \$583	6737 - \$808
School Lunch Program	NA	6792 - \$466	NA

**PLAN REVIEW FEES**

New Construction	4 hour base fee (\$804 ) + \$201/hr after 4 hours
Remodel	3 hour base fee (\$603 ) + \$201/hr after 3 hours
Multiple plan review in one facility	3 hour base fee (\$603 ) + \$201/hr after 3 hours
Resubmitted plan review-billable	\$201/hr
Subsequent preoccupancy or field plan review	2 hour base fee (\$402 ) + \$201/hr after 2 hours
Changes to Mobile and Limited Food Service Establishments	\$402 + \$201/hr after 2 hours

**PRORATION SCHEDULE**

Operating 4 or fewer months	25% of annual permit fee
Operating more than 4 and up to 7 months	50% of annual permit fee
Operating more than 7 and up to 10 months	75% of annual permit fee
Operating more than 10 months and up to 12 months	100% of annual permit fee

**LATE FEES**

Annual permits 10-30 days	10% of annual permit fee
Annual permits 31 days – 60 days	20% of annual permit fee
Annual permits more than 60 days	30% of annual permit fee
Seasonal permits	\$25

**MISCELLANEOUS FEES**

Duplicate permit	\$25
Permit Transfer ,Name Change, no other change	\$25
Request for variance	\$154
Check returned by bank	\$25
Processing a refund	\$25
After hours inspection	Cost of service

**MAKE CHECKS PAYABLE TO: SKCDPH**

**MAIL TO: Public Health – Seattle & King County  
Downtown Environmental Health  
401 - 5<sup>th</sup> Avenue, Suite 1100  
Seattle, WA 98104**

**PERMITS AND LICENSES PHONE: 206-296-2966 Fax- 206-205-0639**

**WEBSITE: <http://www.kingcountv.gov/health/foodsafety>**